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PTO/SB/21 (12-97)
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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

| | | |
|--|------------------------|-----------------------|
| TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i> | Application Number | 10/730,291 |
| | Filing Date | December 5, 2003 |
| | First Named Inventor | James N. CURTI et al. |
| | Group Art Unit | 1722 |
| | Examiner Name | Stefan STAICOVICI |
| Total No. of Pages in this Submission: 20 | Attorney Docket Number | SALTER P42AUSP2 |

ENCLOSURES *(check all that apply)*

| | | |
|---|--|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee attached <input checked="" type="checkbox"/> Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <i>(in Duplicate)</i> <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Part/s Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment papers <i>(for an Application)</i> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition (DELETED - no longer useful) <input type="checkbox"/> To Convert a Provisional Petition <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group <i>(Appeal Notice, Brief, Reply Brief)</i> <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) <i>(please identify below):</i> Terminal Disclaimer |
|---|--|---|

REMARKS

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | |
|-------------------------|---|--|
| Firm or Individual Name | Michael J. BUJOLD DAVIS & BUJOLD, P.L.L.C. | Reg. No. 32,018 CUSTOMER NO. 020210 |
| Signature | | |
| Date | March 27, 2007 | |

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on March 27, 2007

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|-----------------------|----------------------------|
| Type or printed name. | Michael J. BUJOLD |
| Signature | Date: March 27, 2007 (lfb) |

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Complete if Known

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL
For FY 2006

Application No.
Filing Date
First Named Inventor
Examiner Name
Art Unit

10/730,291
December 5, 2003
James N. CURTI et al.
Stefan STAIKOVICI
1732

Attorney Docket No.

SALTER P42AUSP2

TOTAL AMOUNT OF PAYMENT: \$130

METHOD OF PAYMENT (check all that apply)

☒ Check
 ☐ Credit Card
 ☐ Money Order
 ☐ None
 ☐ Other (please identify):

■ Deposit Account Deposit Account Number 04-0213 Deposit Account Name: DAVIS & BUJOLD, P.L.L.C

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below ☐ Charge fee(s) indicated below except for the filing fee

☐ Charge any additional fee(s) or underpayments of fee(s) ☐ Credit any overpayments
 under 37 CFR 1.16 and 1.17

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | |
|-------------------------|-----------------|---------------------|-----------------|---------------------|------------------|----------------|-----------------------|
| | | <u>Small Entity</u> | | <u>Small Entity</u> | | | |
| <u>Application Type</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Fee (\$)</u> | <u>Fee (4)</u> | <u>Fees Paid (\$)</u> |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |

2. EXCESS CLAIM FEES

| EXCESS CLAIM FEES | | Small Entity |
|--|----------|--------------|
| Fee Description | Fee (\$) | Fee (\$) |
| Each claim over 20 (including Reissues) | 50 | 25 |
| Each independent claim over 3 (including Reissues) | 200 | 100 |
| Multiple dependent claims | 360 | 180 |

| <u>Total Claims</u> | <u>Extra Claims</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> | <u>Multiple Dependent Claims</u> |
|---------------------|---------------------|-----------------|----------------------|----------------------------------|
| -20 or HP = | x | = | | Fee (\$) |
| | | | | Fee Paid (\$) |

Indep. Claims Extra Claims Fee (\$) Fee Paid (\$) _____
 _____ -3 or HP + _____ x _____ = _____
 HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

| | | | | |
|---------------------|---------------------|--|-----------------|----------------------|
| <u>Total Sheets</u> | <u>Extra Sheets</u> | <u>No. of each additional 1/50 or fraction thereof</u> | <u>Fee (\$)</u> | <u>Fee Paid (\$)</u> |
| -100 = | / 50 = | (round up to a whole number) x | = | |

4. OTHER FEE(S)

| | |
|--|--------------|
| Terminal Disclaimer To Obviate a Double Patenting Rejection over a "Prior" Patent | \$130 |
|--|--------------|

Other (e.g., late filing surcharge): _____

SUBMITTED BY

Signature

Telephone (603) 226-7490

Name
(Print/Type)

Michael J. BUJOLD

Registration No.
(Atty/Agent) 32,018

Date: March 27, 2007